

RURAL DISTRICT OF BATTLE



Annual Report
of the
Medical Officer of Health
for the year 1969

M. I. SILVERTON,
O.B.E., O.St.J., T.D., M.R.C.S., L.R.C.P., D.P.H., F.R.S.H.



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INDEX

Accidents both in and outside the Home	10
Ambulance Service	20
Animal Boarding Establishments Act, 1963	47
Births and Birth Rates	6
Central Abattoir	32
Cervical Cytology	22
Cesspool Emptying Service	38
Civic Amenities Act, 1967	39
Deaths and Death Rates	7/8
Deaths—65 years of age and over	9
Deaths—Detailed Causes	7
Deaths—Specific Causes and Rates	9
Dungeness Nuclear Power Station	38
Eastern Co-ordination Committee	28
Factories Act, 1961	47/48
Family Planning Association	27
Food and Drugs Act, 1955	33
Food Hygiene	30/31
Game Dealers' Licences	32
General Provision of Health Services for the Area	20/30
Home Help Service	21
Home Physiotherapy Service... ..	26
Hop-picking	50
Hospitals	22
Housing for the Elderly	43
Housing—General	40
Housing—Improvement Grants	42
Housing—New Dwellings	44
Housing Provided by Local Authority	43
Industries	49
Infant Welfare Centres	21
Infectious Diseases in Age Groups	15
Infectious Diseases—Comparative Statistics, 1964-1969	16
Infectious Diseases—Distribution in Parishes	15
Infectious Diseases—Ministry of Education Recommendations re exclusion	17
Infectious Diseases—Seasonal Incidence	16
Inspection of Meat and other Foods... ..	32
Licensed Caravan Sites	45
Litter Act, 1958	39
Marriage Guidance Councils	27
Mass Miniature Radiography in Industry	49
Meals on Wheels Service	28
Mental Health Service	21
Meteorology	51
Milk	33
Mortuary Facilities	11
Motor Vehicle Deaths	11
Mouth-to-Mouth Resuscitation	11
National Assistance Act, 1948	26
Offices, Shops and Railway Premises Act, 1963	47
Poultry Inspection	34
Prevention of Damage by Pests Act, 1949	50
Protective Inoculations and Smallpox Vaccination	18/19
Public Conveniences	40
Public Health Laboratory Service	23
Refuse Collection	39
Rent Act, 1968	40
Rye and District Council for the Welfare of the Elderly	30
Schedule of Vaccination and Immunisation	20
Sewerage	38
Smoking and Disease	11
Summary of Population, Births and Deaths with Rates	9
Tuberculosis	12
Vaccination and Immunisation, Schedule of Procedures	18
Visits of Public Health Inspectors	46
Vital Statistics	6
Water—Distribution of Piped Supplies	36
Water Samples	37
Water Supply—Fluoride Content	35
Water Supply—General	34

TO THE CHAIRMAN AND COUNCILLORS OF BATTLE RURAL DISTRICT
COUNCIL.

I have the honour to submit the Annual Report for the year 1969.

The statistics reveal that the health of the District compares favourably with the rest of England and Wales.

The Meals on Wheels (Local Authority) scheme originally urged by the Clerk of the Council and supported throughout by the Chairman of the Public Health Committee and all Councillors was a pioneer effort in the use of frozen foods and in effectively giving full coverage to a rural district of this size.

In the short space of eighteen months it has amply demonstrated its value in satisfying a basic need and is indeed a tribute to this Council's social sense of care for that worthy section of the community who are unfortunately so easily forgotten.

It not only has the virtue of increasing well-being and happiness but is economically sound when one considers the alternative cost of treating the undernourished as institutional cases occupying beds in hospitals or welfare accommodation. This in essence is preventive medicine at its best.

Volunteers are still needed for the distribution of meals by the Women's Royal Voluntary Service in order to achieve an optimum five-day service and it is hoped that full publicity will be given to this aspect of recruitment which includes both men and women. Those interested in offering their services are invited to telephone or call at my office for further information.

I would like to express my thanks to Mr. Dunford, Chief Public Health Inspector, and the Public Health Inspectors for their loyal support at all times.

Mrs. Edwards, Chief Clerk, supported by the Clerical Staff, have given able and loyal service.

I am obliged to the Clerk of the Council and other Chief Officers for their courtesy and co-operation.

I have the honour to be, Ladies and Gentlemen,

Your obedient servant,

M. I. SILVERTON,

Medical Officer of Health.

The Watch Oak,
Battle, Sussex.

Telephone: Battle 2214.

THE RURAL DISTRICT OF BATTLE

PUBLIC HEALTH COMMITTEE

(constitution at 31st December, 1969)

Chairman:

MR. Q. LLOYD

Vice-Chairman:

MRS. F. R. BISHOP

MR. C. RACKETT, (Chairman of the Council)

SIR ROBERT ALFORD, K.B.E., C.M.G.	MR. J. W. E. HAY-DRUMMOND- HAY, T.D.
MR. H. C. ARIS	MR. H. M. HORSLEY
MR. E. E. BEANEY	MR. J. A. MACOUN
THE HON. E. DAPHNE COURTHOPE, O.B.E.	MR. F. J. REEVES
SIR RAYNOR ARTHUR, K.C.M.G., C.V.O., J.P.	MRS. A. G. K. WILSON
	DR. J. R. WRIGHT, T.D., J.P.

STAFF OF PUBLIC HEALTH DEPARTMENT

Medical Officer of Health:

M. I. SILVERTON, O.B.E., O.St.J., T.D., M.R.C.S., L.R.C.P., D.P.H.,
F.R.S.H.

(also Medical Officer of Health to Borough of Rye and School Medical
Officer to East Sussex County Council)

Senior Public Health Inspector:

W. T. DUNFORD, Cert.S.I.B., Meat and Foods Cert.

Deputy Senior Public Health Inspector:

R. E. BRIGGS, D.P.A., Cert.S.I.B., Meat and Foods Cert.

Public Health Inspectors:

R. D. Brown, Cert.S.I.B., Meat and Foods Cert.
R. Pulford, Cert.S.I.B., Meat and Foods Cert.
R. C. Price, Cert.S.I.B., Meat and Foods Cert.
P. J. Griggs, Pupil Public Health Inspector

Chief Clerk:

Mrs. W. R. Edwards

Shorthand-Typists and General Clerks:

C. W. Field
Mrs. M. Harding
Miss J. Jones (to 7.7.1969)
Miss A. C. Pankhurst (from 14.7.1969)

Rat Catcher:

R. Elliott

STATISTICS RELATING TO BATTLE RURAL DISTRICT

Area of district in acres (estimated)	117,147
Population (Registrar General's estimate for mid-year) ..	32,340

Analyses of Rateable Values

	1st April, 1969		1st April, 1970	
Domestic properties ..	905,152	74.6%	939,078	71.8%
Commercial properties	111,406	9.2%	158,473	12.1%
Industrial properties ..	76,835	6.3%	84,566	6.5%
Other properties ..	119,462	9.9%	125,606	9.6%
	<u>1,212,855</u>	<u>100%</u>	<u>1,307,723</u>	<u>100%</u>
Product of a 1d. rate ..	£5,160		£5,380	
Number of rateable properties as at 1st April	14,915		15,345	

VITAL STATISTICS

Mothers and Infants

Live Births

	Male	Female	Total
Legitimate	179	164	343
Illegitimate	13	13	26
	<u>192</u>	<u>177</u>	<u>369</u>

Stillbirths

	Male	Female	Total
Legitimate	2	1	3
Illegitimate	0	1	1
	<u>2</u>	<u>2</u>	<u>4</u>

Illegitimate Live Births (per cent of total live births)

Live Birth Rate per 1,000 population

Standardised Birth Rate

Stillbirth Rate per 1,000 total live and stillbirths

Total Live and Stillbirths

Infant Deaths (deaths under one year)

Infant Mortality Rates

Total infant deaths per 1,000 live births

Legitimate infant deaths per 1,000 legitimate live births

Illegitimate infant deaths per 1,000 illegitimate live births

Neo-natal Mortality Rate (deaths under 4 weeks per 1,000 total live births)

Early Neo-natal Mortality Rate (deaths under 1 week per 1,000 total live births)

Battle R.D. **England and Wales**

7 8

11.4 16.3

15.0 16.3

11 13*

373 808,204

10 14,397

27 18

26 17

38 25

24 12

19 10

*Lowest rate recorded.

	Battle R.D.	England and Wales
<i>Perinatal Mortality Rate</i> (stillbirths and deaths under 1 week combined per 1,000 total live and stillbirths)	29	23
<i>Maternal Mortality</i> (including abortion):		
Number of deaths	Nil	310
Rate per 1,000 total live and stillbirths ..	Nil	0.38

Deaths

	Battle R.D.		England and Wales	
Male	266	} 541	Male ..	296,561
Female	275		Female ..	282,817
				} 579,378

Deaths per 1,000 home population (crude rate)	16.7	11.9
Standardised death rate	10.0	11.9

The standardised Birth and Death Rates pay due regard to the increased proportion of aged and retired persons within the Rural District as compared with England and Wales, and this is reflected in the increased number of deaths and the comparatively low number of births.

Equalisation is achieved by using an area comparability factor which is provided annually by the Registrar General.

DETAILED CAUSES OF DEATH

Cause of Death	Sex	Total All Ages	Under 1 Year	1- 14	15- 24	25- 34	35- 44	45- 54	55- 64	65 and over
Non-respiratory Tuberculosis, incl. Late Defects	M	1	—	—	—	—	—	—	—	1
*Measles	M	2	—	1	1	—	—	—	—	—
	F	2	—	1	—	1	—	—	—	—
Syphilis and its Sequelae	M	1	—	—	—	—	—	—	—	1
Other Infective and Parasitic Diseases	M	1	—	1	—	—	—	—	—	—
	F	3	—	1	1	—	—	—	1	—
Malignant Neoplasm, Buccal Cavity, etc.	M	1	—	—	—	—	—	—	—	1
Malignant Neoplasm, Stomach	M	3	—	—	—	—	—	—	—	3
	F	3	—	—	—	—	—	—	—	3
Malignant Neoplasm, Intestine	M	8	—	—	—	—	—	1	1	6
	F	8	—	—	—	—	—	—	1	7
Malignant Neoplasm, Larynx	M	1	—	—	—	—	—	—	—	1
	F	1	—	—	—	—	—	—	—	1
Malignant Neoplasm, Lung, Bronchus	M	28	—	—	—	—	—	—	11	17
	F	8	—	—	—	—	—	2	3	3
Malignant Neoplasm, Breast	F	9	—	—	—	—	—	1	3	5
Malignant Neoplasm, Uterus	F	5	—	—	—	—	—	1	1	3
Malignant Neoplasm, Prostate	M	5	—	—	1	—	—	—	—	4

*Occurring in a local specialised hospital.

DETAILED CAUSES OF DEATH (continued)

Cause of Death	Sex	Total All Ages	Under 1 Year	1- 14	15- 24	25- 34	35- 44	45- 54	55- 64	65 and over
Leukaemia	M	3	—	1	—	—	—	—	1	1
	F	2	—	—	1	—	—	1	—	—
Other Malignant Neo- plasms	M	6	—	—	—	—	—	1	2	3
	F	13	—	1	—	1	2	1	2	6
Anaemias	M	1	—	—	—	—	—	—	—	1
	F	1	—	—	—	—	—	—	—	1
Mental Disorders	M	2	—	—	—	—	—	—	—	2
	F	3	—	—	—	—	—	—	—	3
Other Diseases of Nervous System, etc.	M	2	—	—	—	—	—	—	—	2
	F	4	—	—	—	—	—	1	—	3
Chronic Rheumatic Heart Disease	M	2	—	—	—	—	—	—	1	1
Hypertensive Disease	M	7	—	—	—	—	—	—	1	6
	F	6	—	—	—	—	—	—	—	6
Ischaemic Heart Disease	M	60	—	—	—	—	1	4	6	49
	F	51	—	—	—	—	—	—	5	46
Other Forms of Heart Disease	M	8	—	—	—	—	—	—	1	7
	F	24	—	—	—	—	—	—	1	23
Cerebrovascular Disease	M	36	—	—	—	—	—	1	6	29
	F	52	—	—	—	—	—	1	—	51
Other Diseases of Cir- culatory System	M	11	—	—	—	—	—	—	—	11
	F	10	—	—	—	—	—	1	—	9
Influenza	M	3	—	—	—	—	—	—	—	3
	F	3	—	—	—	—	—	—	—	3
Pneumonia	M	22	—	1	—	—	—	—	2	19
	F	23	—	—	—	—	—	—	3	20
Bronchitis and Emphysema	M	23	2	—	—	—	1	—	3	17
	F	6	—	—	—	—	—	—	2	4
Other Diseases of Respiratory System	M	1	—	—	—	—	—	—	—	1
	F	3	—	1	—	—	—	—	1	1
Peptic Ulcer	M	5	—	—	—	—	—	—	—	5
	F	1	—	—	—	—	—	—	—	1
Intestinal Obstruction and Hernia	M	2	—	—	—	—	—	—	—	2
	F	2	—	—	—	—	—	—	—	2
Cirrhosis of Liver	F	1	—	—	—	—	—	—	—	1
Other Diseases of Digestive System	F	1	—	—	—	—	—	—	—	1
Nephritis and Nephrosis	M	2	—	—	—	—	—	1	1	—
Hyperplasia of Prostate	M	2	—	—	—	—	—	—	—	2
Other Diseases Genito- urinary System	M	2	—	—	—	—	—	—	—	2
	F	4	—	—	—	—	—	—	2	2
Diseases of Musculo- skeletal System	F	3	—	—	—	—	—	—	—	3
Congenital Anomalies	M	2	—	1	—	—	—	—	—	1
	F	2	1	1	—	—	—	—	—	—
Birth Injury, Difficult Labour, etc.	M	1	1	—	—	—	—	—	—	—
	F	2	2	—	—	—	—	—	—	—
Other Causes of Perinatal Mortality	M	1	1	—	—	—	—	—	—	—
	F	3	3	—	—	—	—	—	—	—
Symptoms and Ill- defined Conditions	M	2	—	—	—	—	—	1	—	1
	F	4	—	—	—	—	—	—	—	4
Motor Vehicle Accidents	M	4	—	—	2	—	—	—	1	1
All Other Accidents	M	3	—	—	1	1	—	—	—	1
	F	8	—	—	—	—	—	1	1	6
Suicide and Self-Inflicted Injuries	M	2	—	—	—	1	—	—	—	1
	F	2	—	—	—	—	—	—	2	—
All Other External Causes	F	2	—	—	—	—	1	—	—	1
TOTAL ALL CAUSES	M	266	4	5	5	2	2	9	37	202
	F	275	6	5	2	2	3	9	29	219

MAIN CAUSES OF DEATH

	1967	1968	1969
(i) Diseases of the heart and circulatory system	81 (15.9%)	63 (11.1%)	68 (12.6%)
Coronary disease	130 (25.7%)	126 (23.5%)	111 (20.5%)
(ii) Malignant neoplasms (cancer) .	56 (11.0%)	69 (12.8%)	68 (12.6%)
Cancer of lung and bronchus ...	38 (7.5%)	28 (5.2%)	36 (6.7%)
(iii) Vascular lesions of the nervous system	90 (19.7%)	125 (23.3%)	88 (16.3%)
(iv) Respiratory disease (excluding tuberculosis)	45 (8.9%)	59 (10.9%)	84 (15.5%)

DEATHS FROM SPECIFIC CAUSES AND
RATES PER 1,000 POPULATION

	Bath R.D.		England and Wales	
	No. of Deaths	Per 1,000 pop.	No. of Deaths	Per 1,000 pop.
Tuberculosis (respiratory)	0	0.00	1,092	0.02
Bronchitis	29	0.89	35,470	0.73
Pneumonia	45	1.39	41,081	0.84
Vascular disease including Coronary and heart disease	267	8.26	293,735	6.02
Cancer of the lung, trachea and bronchus	36	1.11	29,768	0.61
Cancer, all other forms	68	2.10	84,936	1.74
Motor vehicle accidents	4	0.12	6,628	0.14
All other accidents	11	0.34	10,628	0.22

DEATHS—65 YEARS OF AGE AND OVER

	Bath R.D.		Greater London	
	1968	1969	1968	1969
Total deaths	537	541	90,287	88,640
Number of deaths 65 years and over ..	428	470	63,170	61,682
Percentage of total deaths	79.7	86.9	69.9	69.6

SUMMARY OF POPULATION, BIRTHS AND DEATHS WITH RATES
1959-1969

Year	Estimated population	Total live births			Standardised Birth rate	Birth rate Eng. & W.	Total deaths			Standardised death rate	Death rate Eng. & W.	Natural decrease
		M	F	Total			M	F	Total			
1959	29,640	196	165	361	14.3	16.5	199	239	438	10.3	11.6	- 77
1960	29,970	231	190	421	16.5	17.1	201	240	441	10.4	11.5	- 20
1961	30,400	174	188	362	14.0	17.4	235	262	497	11.6	12.0	-135
1962	30,710	195	189	382	14.6	18.1	227	248	475	10.3	11.9	- 93
1963	31,000	186	192	378	16.0	18.2	244	288	532	11.3	12.2	-154
1964	31,410	218	197	415	17.4	18.4	264	251	515	10.8	11.3	-100
1965	31,910	206	192	398	16.4	18.1	262	235	497	9.9	11.5	- 99
1966	31,910	197	200	397	16.4	18.1	271	256	527	10.0	11.7	-130
1967	32,060	176	190	366	15.1	17.2	269	238	507	10.0	11.2	-141
1968	32,260	170	163	333	13.6	16.9	286	251	537	10.0	11.9	-204
1969	32,340	192	177	369	15.0	16.3	266	275	541	10.0	11.9	-172

ACCIDENTS BOTH IN AND OUTSIDE THE HOME (England and Wales)

	1968			1969		
	Male	Female	Total	Male	Female	Total
Accidental poisoning	421	543	964	416	501	917
Accidental falls	1,788	3,715	5,503	1,857	3,911	5,768
Accidents caused by fire	337	454	791	303	442	745
Accidental drowning	355	97	452	410	113	523
All other accidents	1,457	628	2,085	1,498	657	2,155
TOTALS	4,358	5,437	9,795	4,484	5,624	10,108

The results of the Hospital In-patient Enquiry in England and Wales based on a 10% sample survey in 1967 indicated some features which would merit further investigation when considering the prevention of accidents in the home.

Fractures of the thigh bone (femur) accounted for 9,210 female admissions in the age groups 75 and over. 6,500 of these were fractures of the neck of the femur although a wellknown weakness in the female bone structure of the elderly it is considered that a proportion could have been prevented by care in the home e.g. by the exclusion of carpets on polished floor surfaces, the leaving of loose articles (toys, etc.) on floors and the provision of handrails.

Two disquieting features were the 7,210 children under 5 years who suffered fractures of the skull and other head injuries, many resulting in permanent damage and the 4,150 burns occurring in the 0-4 age group.

In this latter respect frying, unless carefully controlled, is a potential hazard which by its very frequency of use induces a sense of familiarity conducive to carelessness with most shattering results to life, subsequent invalidism and bodily handicaps, apart from the possible loss of one's home by fire. All this is capable of prevention but only by adopting a rigid set of rules when frying—

- (i) Do not leave the pan unattended while it is being heated.
- (ii) Do not heat the oil or fat beyond the point at which it gives off a faint smoke haze (205°C if using a cooking thermometer).
- (iii) Do not fill the pan more than $\frac{1}{3}$ full, this reduces the risk of splash-over when adding the food to be fried.
- (iv) Do leave the lid off when heating if possible, otherwise remove it at frequent intervals to see that the oil or fat is not smoking.
- (v) Do dry the food as much as possible before putting it in the pan of fat.
- (vi) Do always use a clean dry pan and lid.

MOTOR VEHICLE DEATHS

<i>England and Wales</i>				<i>Male</i>	<i>Female</i>	<i>Total</i>
1967	..	..	..	4,936	2,232	7,168
1968	..	..	..	4,315	2,034	6,349
1969	..	..	..	4,598	2,030	6,628

There were four deaths from this cause within Battle Rural District during 1969.

MORTUARY FACILITIES

Available by arrangement with the Hospital Management Committee at Rye Hospital.

The mortuary at the Royal East Sussex Hospital, Hastings, is used whenever possible.

MOUTH TO MOUTH RESUSCITATION

Instruction of the public on the mouth-to-mouth method of resuscitation continued throughout the year and included Ambulance Staff, Fire Service, Emergency Volunteers, a County Secondary School, Boy Scouts and Girl Guides. A total of 133 persons attended for instruction.

I am indebted to Mr. R. A. Walker, S.B.St.J., Sub-station Officer, Rye, and Mr. A. R. Hoad, Sub-station Officer, Battle, both of the St. John Ambulance Brigade, for their personal efforts and interest in making themselves available to give these demonstrations in their off-duty times.

SMOKING AND DISEASE

Lung Cancer deaths in England and Wales

				1967	1968	1969
Males	..	..	..	23,510	23,903	24,695
Females	..	..	..	4,678	4,933	5,073
				<hr/> 28,188 <hr/>	<hr/> 28,836 <hr/>	<hr/> 29,768 <hr/>

At a conservative estimate 50,000 deaths a year from disease which includes lung cancer are directly attributable to cigarette smoking. On average, three under 45 years and six under 50 years die every day because of this addiction.

Apart from the danger to actual smokers, the pollution of the environment by the idling cigarette is now considered to be an appreciable hazard to non-smokers and others in the immediate vicinity.

A recent American study revealed the likelihood that there is a greater incidence of periodontal disease in smokers generally, thus

female smokers from 20 to 39 years have twice a chance of being toothless than do non-smokers, this applies to males from 30 to 59 years.

One wonders whether there is any association with the finding of a research chemist that "one cigarette destroys about 25 mg. of vitamin C so that those smoking more than 15 cigarettes a day may have a 50% reduction of serum vitamin C".

Is the smoker in this context suffering from a manifestation of scurvy? Further research would appear to be indicated in this respect.

TUBERCULOSIS

	Pulmonary Cases			Non-Pulmonary Cases			Total Cases (all forms)		
	M	F	Total	M	F	Total	M	F	Total
1. No. on Register at 1st January, 1969 ..	59	54	113	4	11	15	63	65	128
2. Cases previously removed and re-notified in 1969 ..	—	—	—	—	—	—	—	—	—
3. Primary notifications received in 1969 ..	1	1	2	—	1	1	1	2	3
4. Cases moved into area as transfers in 1969	2	1	3	—	—	—	2	1	3
Totals	62	56	118	4	12	16	66	68	134
*5. Cases removed from Register in 1969 ..	—	1	1	—	—	—	—	1	1
6. Number on Register at 31st December, 1969	62	55	117	4	12	16	66	67	133

*Died from causes other than tuberculosis.

NEW CASES NOTIFIED GIVING AGE GROUPS

Age	New Cases Primary Notifications			
	Pulmonary		Non-Pulmonary	
	M	F	M	F
0—2 ...	—	—	—	—
3—5 ...	—	—	—	—
6—10 ...	—	—	—	—
11—15 ...	—	—	—	—
16—25 ...	—	—	—	—
26—35 ...	—	—	—	—
36—45 ...	—	—	—	—
46—60 ...	1	—	—	—
Over 60 ...	—	1	—	1

TUBERCULOSIS PREVENTION

The suggested phasing out of this service was contained in Memorandum H.M. (69) 97 of December, 1969.

My personal view is that the actual cause of the ultimate decision to phase out Mass Miniature Radiography was the new vehicle braking system requirements by the Ministry of Transport which triggered off this facile economic solution to this problem by elimination. Hospital finance generally is under great pressure and the short term saving envisaged by closure is attractive to those whose pre-occupation is curative medicine, so the longer term beneficial economic effect of prevention is conveniently forgotten.

The detection of "active" T.B. cases has dropped considerably over the years, in large measure due to the ease of attendance at well-sited, publicised mobile vans in remote areas with poor communications, so assisting in overcoming public apathy which is the usual pattern whenever preventive health measures are launched.

In effect, its own success in attracting the public in large numbers is contributing to its downfall, too many fit people attend, thus distorting the statistical picture for actual cases found.

Additionally, other conditions affecting the lungs and heart are discovered which may not be presenting any symptoms in the early stages and therefore more readily amenable to treatment.

I submit this loss to public health would be considerable if those persons seeking a health check were expected to travel and then queue in the out-patient departments of already overloaded centralised hospitals with the inevitable frustration engendered by hanging about.

I cannot imagine there would be much of a response by apparently fit volunteers whose main wish would be for reassurance. A "sick" service would result, as only those already presenting symptoms would attend, the essential preventive aspect would thus be lost.

Finally, streamlining is necessary and there is in my opinion much good sense in this memorandum but it fails on two counts:—

(1) to distinguish between the special needs of remote rural areas as against conurbations, where facilities are so easily available.

(2) to appreciate the apathy encountered in any public health measure which requires personal action and involvement for some future apparently intangible benefit.

In order to achieve success the path must be made as easy as possible but here we have the introduction of travel to a remote hospital with all that this involves once one becomes enmeshed in the machine. It no longer becomes a simple procedure in one's own milieu taking two minutes for the whole operation.

INCIDENCE OF INFECTIOUS DISEASES

Diphtheria and Poliomyelitis

This district has been free from Diphtheria and Poliomyelitis for the past 24 years and 10 years respectively.

Importation from abroad is a continuing ever present danger.

Immunisation is the controlling factor in the elimination of these diseases.

Measles

1969 was a year of low incidence, the usual biennial attack did not occur doubtless influenced by the recent immunisation campaign. Manufacturing difficulties encountered during the year resulted in insufficient vaccine being made available leading to a virtual cessation of immunisation. It is likely that we will now revert to a greatly increased attack rate in the ensuing year.

Whooping cough

Low incidence with immunisation controlling and minimising adverse effects. A fall from 170,000 cases in 1951 to 17,000 cases (1969) and deaths from over 2,500 to 25 is an indication of its efficacy.

Scarlet fever

Mild in character and of no special significance, no case admitted to hospital. The usual investigations were made in each case regarding the possibility of food handlers being involved and where indicated, alternative work was advised and accepted.

Influenza

The advent of a new variant of the A2 strain in 1968 did not give rise to the expected epidemic prognosticated by the Ministry and the national press with such vehemence for January and February of 1969 and the weekly death tolls from this infection were the lowest for ten years. However, the attack was merely delayed and on December 12th. 1969, numbers attacked were suddenly increased fourfold and by the end of the year the red alert was put into operation for hospitals throughout London and the South East, stopping all but urgent admissions. The peak death rate for England and Wales was 3,170 in the week ended 2nd January, 1970, compared with 35 in the week ended 3rd January, 1969. Vaccination to protect the elderly and those liable to heart, lung and kidney illnesses would appear to be indicated as an annual protective measure.

Administration of T.A.B. Vaccine

All persons intending to travel abroad should be vaccinated against typhoid and paratyphoid fevers. This will normally be done by the individual's own doctor. Dosage varies according to age. For primary immunisation, two doses should be given at an interval of 4 to 6 weeks followed by a third dose 6 to 12 months after the second. Reinforcing doses at yearly intervals are advocated where the subject is at continued risk.

DISTRIBUTION OF INFECTIOUS DISEASES IN THE PARISHES

	Measles	Infective Jaundice	Scarlet Fever
Ashburnham (265)	—	—	—
Battle (4,805)	1	1	3
Beckley (891)	2	—	—
Bodiam (274)	—	—	—
Brede (1,312)	—	1	—
Brightling (368)	—	—	—
Burwash (1,994)	2	—	—
Camber (540)	15	1	1
Catsfield (740)	—	—	—
Crowhurst (687)	—	—	—
Dallington (288)	—	—	—
East Guldeford (81)	—	—	—
Etchingham (590)	—	—	—
Ewhurst (842)	1	—	—
Fairlight (1,589)	—	—	—
Guestling (1,123)	—	—	—
Hurst Green (819)	—	—	—
Icklesham (2,414)	—	4	1
Iden (392)	—	—	—
Mountfield (493)	—	—	—
Northiam (1,624)	—	—	—
Peasmarsh (756)	—	—	—
Penhurst (37)	—	—	—
Pett (712)	—	—	—
*Playden (298)	31	25	—
Rye Foreign (193)	2	—	—
Salehurst (4,974)	—	—	—
Sedlescombe (1,198)	1	1	17
Ticehurst (1,842)	4	—	1
Udimore (366)	—	—	—
Westfield (2,107)	—	—	—
Whatlington (320)	—	—	—
Totals	59	33	23

Estimated population of parishes given in brackets (East Sussex County Council Year Book, 1969/70).

*Relates to a specialised hospital in this parish.

CASES OF INFECTIOUS DISEASES IN AGE GROUPS

Disease	Under 1 year	1-2 years	3-4 years	5-9 years	10-14 years	15-24 years	25-44 years	45-64 years	65 and over	Totals
Scarlet fever...	—	—	7	13	2	1	—	—	—	23
Measles ...	—	2	10	16	18	10	3	—	—	59
Infective jaundice ...	—	—	—	7	15	4	2	4	1	33
	—	2	17	36	35	15	5	4	1	115

SEASONAL INCIDENCE OF NOTIFIABLE INFECTIOUS DISEASES

Disease	Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Totals
Scarlet fever ..	—	—	—	—	—	1	—	—	7	8	4	3	23
Measles ..	31	2	3	1	3	10	6	1	1	—	—	1	59
Infective jaundice	23	2	3	—	—	2	—	—	2	—	1	—	33
Totals ..	54	4	6	1	3	13	6	1	10	8	5	4	115

COMPARATIVE STATISTICS FOR THE YEARS 1964-1969
1st JANUARY-31st DECEMBER

	1964	1965	1966	1967	1968	1969
Measles	315	341	181	438	39	59
Scarlet fever	7	15	5	6	4	23
Whooping cough	33	2	13	10	9	—
*Acute pneumonia	9	1	3	4	4	—
*Erysipelas	2	2	1	2	1	—
*Puerperal pyrexia	1	1	—	1	1	—
Dysentery	1	—	3	—	—	—
Para-typhoid	—	—	1	—	1	—
Infective jaundice	—	—	—	—	13	33†

*Ceased to be notifiable on 1st October, 1968.

†This outbreak was fully described in my 1968 Annual Report.

PERIOD OF EXCLUSION IN CERTAIN INFECTIOUS DISEASES
MINISTRY OF EDUCATION RECOMMENDATIONS

	Usual Incubation period (days)	Interval between onset and appearance of rash (days)	Period of exclusion	
			<i>Patients</i>	<i>Contacts</i> , i.e. the other members of the family or household living together as a family, that is, in one tenement.
SCARLET FEVER AND STREPTOCOCCAL SORE THROAT	1—7	1—2	Re-admit when family doctor permits.	Adult contacts engaged in school meals service excluded until Medical Officer of Health allows return to work. Other contacts, if healthy, need not be excluded.
MEASLES	7—14	3—4	10 days after the appearance of the rash if the child appears well.	Children under 5 years of age who have not had the disease should be excluded for 7 days from the date of the appearance of the rash in the last case in the house. Other contacts can attend school. Any contact suffering from a cough, cold, chill or red eyes should be immediately excluded.
GERMAN MEASLES	5—21	0—2	7 days from the appearance of the rash.	None.
WHOOPING COUGH	6—18	—	28 days from the beginning of the characteristic cough.	Children under 7 years who have not had the disease should be excluded for 21 days from the date of onset of the disease in the last case in the house.
CHICKEN-POX	11—21	0—2	7 days from the date of appearance of the rash.	None.
MUMPS	12—28	—	7 days from the subsidence of the swelling.	None.
CONJUNCTIVITIS (INCLUDING PINK EYE)	1—3	—	To be excluded until certified as fit to attend.	None.
RINGWORM OF THE BODY (INCLUDING ATHLETE'S FOOT)	If the infected area can be kept covered the patient need not be excluded. He should not, however, take part in swimming—nor in the case of ringworm of the feet—in gymnastic classes or barefoot dancing.			

SCHEDULE OF VACCINATION AND IMMUNISATION PROCEDURES

Age	Prophylactic	Interval	Notes
During the first year of life	Diph/Tet/Pert. and oral Polio vaccine (First dose)	Preferably after an interval of 6-8 weeks	The earliest age at which the first dose should be given is 3 months, but a better general immunological response can be expected if the first dose is delayed to 6 months of age
	Diph/Tet/Pert. and oral Polio vaccine. (Second dose)		
	Diph/Tet/Pert. and oral Polio vaccine. (Third dose)	Preferably after an interval of 6 months	
During the second year of life	Measles vaccination	After an interval of not less than 3-4 weeks	While the second year is recommended for routine vaccination against smallpox, in individual cases and if special circumstances call for it, vaccination against smallpox may be carried out during the first year
	Smallpox vaccination	After an interval of not less than 3-4 weeks	
At 5 years of age or school entry	Diph/Tet and oral Polio vaccine or Diph/Tet/Polio vaccine Smallpox revaccination		With the exception of smallpox revaccination, these may be given, if desired, at 3 years of age to children entering nursery schools, attending day nurseries or living in children's homes
Between 10 and 13 years of age	B.C.G. vaccine		For tuberculin-negative children
At 15-19 years of age or on leaving school	Polio vaccine (Oral or inactivated) Tetanus toxoid Smallpox revaccination		

PROTECTIVE INOCULATIONS- PERSONS UNDER 16 YEARS OF AGE

	Local Health Authority's Records					
	Completed Primary Course			Completed Re-inforcing course		
	1967	1968	1969	1967	1968	1969
Diphtheria	389	266	144	907	803	444
Whooping cough	333	251	139	363	219	225
Tetanus	398	275	155	863	840	495
*Poliomyelitis	—	384	142	—	341	504

*Figures for 1967 not available.

SMALLPOX VACCINATION

	Local Health Authority's Records					
	Primary			Revaccination		
	1967	1968	1969	1967	1968	1969
Under 1 year	14	6	8	—	—	—
1 year	165	150	106	1	2	—
2—4 years	62	63	89	5	5	6
5—15 years	9	10	22	57	112	65
Totals	250	229	225	63	119	71

Smallpox

International certificates of vaccination against smallpox authenticated in this office for travel abroad:—

	Primary				Revaccination
1967	26	368
1968	36	373
1969	36	418

Travellers, in their own interests, should not proceed to smallpox areas without making certain that they have obtained a successful result to vaccination or re-vaccination.

International Certificate

Gamma globulin is often requested for intending travellers in whom smallpox vaccination is contra-indicated but who wish to obtain an International Certificate of Vaccination against Smallpox. It should be noted that smallpox vaccination in the presence of contra-indications is undesirable even with gamma globulin and that the International Regulations make allowances for persons in whom vaccination is contra-indicated.

Extract from Ministry Memorandum on Vaccination against Smallpox (Memo. 312/MED Revised 1962).

“38. It should be noted that vaccination is not obligatory if a medical contra-indication exists. The following is a quotation from the Official Records of the World Health Organisation 54, 56. ‘If a vaccinator is of the opinion that vaccination is contra-indicated on medical grounds, he should provide the person with written reasons underlying that opinion, which the health authority of arrival may take into account. Decision on a claim for exemption from the requirement to be in possession of a certificate lies solely with the health authority of arrival’ ”.

GENERAL PROVISION OF HEALTH SERVICES FOR THE AREA

(A) PROVIDED BY THE EAST SUSSEX COUNTY COUNCIL UNDER THE
AEGIS OF THE COUNTY MEDICAL OFFICER OF HEALTH

(i) (a) *Ambulance Service*

BATTLE. Sub-station, Ambulance Station, High Street (Telephone Battle 2211), employing 6 men and having 2 ambulances serving the parishes of

Ashburnham	Brightling	Etchingham	Hurst Green
Battle	Burwash	Ewhurst	Mountfield
Bodiam	Catsfield	Flimwell	Penhurst
	Salehurst	Whatlington	

RYE. Sub-station, Conduit Hill (Telephone: Rye 3395) employs 6 men and has 2 ambulances (including 1 dual purpose vehicle for sitting cases) serving the parishes of

Beckley	Icklesham	Rye Foreign
Camber	Northiam	Rye Harbour
East Guldeford	Peasmarsh	Udimore
Iden	Playden	Winchelsea Town
	Winchelsea Beach	

HASTINGS. Main Station, Cambridge Road (Telephone Hastings 30303), serving the parishes of

Brede	Fairlight	Sedlescombe
Crowhurst	Guestling	Westfield
	Pett	

by arrangement with the County Borough of Hastings.

HEATHFIELD. Harecourt Lodge (Telephone: Lewes 079 16-4307), serving the parishes of Burwash, Dallington, Stonegate, Ticehurst and Wallcrouch.

(b) *Hospital Car Service*

The Hospital Car Service is provided by the joint organisations of the Women's Royal Voluntary Service, the British Red Cross and the St. John Ambulance Brigade. The Area Transport Office for this district is at 73a, London Road, Bexhill-on-Sea, 9 a.m. to 6 p.m., Monday to Friday (Telephone: 152). Emergency service at weekend through Ambulance Station.

(ii) *Care of Expectant and Nursing Mothers and Children under school age*

(iii) *District Nurses (Midwives) and Health Visitors*

(iv) *Home Help Service*

This service is much appreciated and of great assistance in avoiding hospitalisation and institutionalism, particularly for those elderly persons desirous of remaining in their own homes.

The Health Services and Public Health Act, 1968 now imposes a duty on the Local Health Authority (instead of a power) to provide or arrange a home help service adequate to the needs of the area.

(v) *Infant Welfare Centres**Name and Address of Centre*

BATTLE: Langton House

GUESTLING: The Village Hall, Icklesham

NORTHAM: William Perigoe Memorial Methodist Church Hall

PEASMARSH: Village Hall

ROBERTSBRIDGE: The Institute, Station Road

RYE: County Clinic, Ferry Road

SEDLSCOMBE: Village Hall

TICEHURST: Institute Hall

WESTFIELD: Church Hall

The times of attendance at these Centres can be obtained direct from the Health Visitors in these areas.

(vi) *Immunisation and Vaccination Service*

Clinics attended by your Medical Officer of Health were held periodically at all schools and as follows:—

BATTLE: Ambulance Station, High Street.	Second WEDNESDAY in each month, by appointment.
--	--

B.C.G. vaccination sessions against tuberculosis are held at schools for children aged 13 years attended by an Assistant County Medical Officer.

(vii) *Mental Health Service*

Mental Health Officers maintain liaison with general practitioners and are available at the following addresses:—

MR. J. G. WILLIAMS, Maple End, Maple Walk, Cooden (Telephone Cooden 2469).

MR. H. C. BEECROFT, 22 Cavendish Avenue, St. Leonards-on-Sea (Telephone Hastings 6742).

MRS. R. V. LEE, 34 Sackville Road, Bexhill-on-Sea (Telephone Bexhill 981).

MR. M. G. FORD, 19 Ghyllside Estate, Northiam (Telephone Northiam 2311).

MR. A. R. BRANT, 13 West View, Hastings (Telephone Hastings 30930).

The Bexhill Area Office is at 54 Sea Road, Bexhill-on-Sea, and the officers meet there between 8.30 and 9.30 a.m. and the clerical staff stay until 5 p.m. (Telephone: Bexhill 7071).

The Mental Health Welfare Officer on duty outside office hours, i.e. after 5 p.m., can be contacted through Hellingly Hospital (Telephone: Hellingly 391).

(viii) *Registration of Nursing Homes*

There is one efficiently-conducted registered private Nursing Home in Battle Rural District.

(ix) *School Dental Service*(x) *School Medical Service (*routine medical examinations including the assessment of handicapped pupils)*

*Delegated duties to your District Medical Officer of Health, who also acts as School Medical Officer.

(xi) *Cervical Cytology*

Application forms to attend clinics, by appointment, within the District may be obtained from the Council Offices, The Watch Oak, Battle; Council Offices, Borough of Rye, Ferry Road, Rye; General Practitioners and Health Visitors.

(B) PROVIDED BY THE EAST SUSSEX COUNTY COUNCIL WELFARE DEPARTMENT

Homes for the Aged

Furze House, Flimwell, Ticehurst
Grey Friars, Winchelsea.

(C) HOSPITALS

The following are the main hospitals providing accommodation and treatment for residents in the Battle Rural District:—

Battle Hospital, Battle.
Memorial Hospital, Rye Foreign.
Isolation Hospital, Tunbridge Wells.
Royal East Sussex Hospital, Hastings (including V.D. Clinic).
Mount Pleasant Isolation Hospital, Hastings.
St. Helen's Hospital, Hastings.
Fernbank Maternity Nursing Home, Hastings.
Buchanan Hospital, St. Leonards-on-Sea.
Eversfield Chest Hospital, St. Leonards-on-Sea.
St. Mary's Hospital, Eastbourne.
Princess Alice Hospital, Eastbourne.
Gildredge Isolation Hospital, Eastbourne.
Bexhill Hospital, Bexhill-on-Sea.
Hellingly Hospital, Hellingly.
Pembury Hospital, Pembury.
Kent and Sussex Hospital, Tunbridge Wells.
Homœopathic Hospital, Tunbridge Wells.
Cottage Hospital, Hawkhurst.
Hill House, Rye Foreign.

Administered by the South-East Metropolitan Regional Hospital Board through their respective Hospital Management Committees.

Blood Transfusion Service

The National Blood Transfusion Service visits Battle periodically.

Stamped addressed leaflets for volunteer donors are available at this Council's Offices.

(D) PUBLIC HEALTH LABORATORY SERVICE

The Public Health Laboratory Service is a free national laboratory service designed to assist all those concerned in the diagnosis, prevention and control of communicable diseases. The benefits are not limited by health authority, hospital region or other administrative boundary. These facilities are available to all doctors, both for the submission of specimens and for consultation.

Gamma globulin prepared from pooled plasma from normal healthy adults (Human normal immunoglobulin) by the Lister Institute for the Ministry of Health, is distributed to doctors in England and Wales mainly through Laboratories of the Public Health Service. Requests for supplies, which are restricted, should be made to the Public Health Laboratory, Royal Sussex County Hospital, Eastern Road, Brighton, BN2 5BE. Tel. Brighton 63506. For other sources of supply, and for categories of patient for whom gamma globulin is available, see below

Rubella, Pregnancy and Gamma Globulin

1. A sample of clotted blood from the mother, in a plain tube, will be requested by the laboratory as soon as possible after the mother's exposure to infection during the first 12 weeks of pregnancy, except when it has already been established by laboratory tests that the mother has previously had rubella. It is important that the request form should give the date or dates on which exposure to infection, is thought to have occurred.
2. The antibody status of the mother will be determined in the laboratory and assessed in relation to the date of exposure. In a high proportion of cases it will be shown that owing to previous infection the mother is immune to rubella. She can then be reassured with regard to the present and future pregnancies. In borderline cases and when no rubella antibodies are found in the mother, a second sample of serum will be asked for by the laboratory. Antibody tests on the second serum, read in conjunction with the first, will show whether or not the mother became infected (subclinically) as a result of the recent exposure to infection.
3. Since it has been shown that gamma globulin does not protect against subclinical rubella, gamma globulin is now seldom given in this context.

Infective Hepatitis and Gamma Globulin

Gamma globulin confers a degree of protection against Infective Hepatitis when given within two weeks of exposure to infection. Current supplies of gamma globulin are insufficient for the protection of all

contacts of Infective Hepatitis but it is available in special circumstances. These include contacts debilitated by serious disease, contacts in artificial kidney units and outbreaks in hospital and laboratory staffs. Gamma globulin may also be issued, on request, to doctors for the passive immunisation of travellers intending to proceed to endemic areas outside Europe and North America. It should be given shortly before the traveller leaves Great Britain. No dose may be issued for despatch to a patient abroad. Travellers for whom it is issued must be British Nationals. If the traveller is a National Health Service patient there is no charge. For private patients there is a charge of £1 15s. od. (per 500 mg. recommended dose) which should be collected by the patient's doctor who will subsequently be invoiced by the Department of Health and Social Security.

Dosage: Under 11 years 250 mg.
 11 years or more 500 mg.

Measles and Gamma Globulin

Available for contacts under 2 years of age or at special risk e.g. debilitated children with no previous history of measles.

Dosage:

1. Attenuation. All ages 250 mg.
2. Prevention Under 1 year 250 mg.
 1-2 years 500 mg.
 3 years and over 750 mg.

When measles vaccine is given to children suffering from chronic diseases of the heart and lungs it may be desirable to modify the possible reaction to the vaccine. This is achieved by simultaneous administration into the opposite limb of 0.6 mg. gamma globulin per lb. of body weight. This dosage should not be exceeded. Gamma globulin in this diluted form is not available from the Public Health Laboratory but can be obtained from the County Health Department, E.S.C.C., Lewes, in ampoules containing 15 mg. of immunoglobulin in 0.5 ml. of diluent.

Hypogammaglobulinaemia and Gamma Globulin

This is the second of two categories for which gamma globulin is not normally issued by the Public Health Laboratory Service. Application should be made to:—

Dr. G. L. Asherson, Clinical Research Centre,
 Northwich Park Hospital, Watford Road,
 HARROW. HA1 3 UJ. Tel.: 01-864 5311.

Anti-vaccinial Gamma Globulin

Obtainable from the Epidemiological Research Laboratory, Central Public Health Laboratory, Colindale Avenue, London, N.W.9. Tel.: 01-205 7041.

1. Smallpox Vaccination in the presence of Contra-indications

Patients with eczema, leukaemia, hypogammaglobulinaemia; or on cortico-steroid or immuno-suppressive therapy; or adults with a marked allergic diathesis; or old and infirm adults.

The gamma globulin should be given into a different site from the vaccine—preferable the buttock.

Dosage:	Patient under 1 year	..	0.5 g. immediately	
	„ 1-6 years	..	1.0g.	„
	„ 7-14 years	..	1.5g.	„
	„ 15 years or more	..	2.0g.	„

2. *Previously Unvaccinated Contacts of Cases of Smallpox*

In conjunction with vaccination, anti-vaccinial gamma globulin given on or about the 10th day after exposure to smallpox may offer additional protection to contacts who have never previously been vaccinated or who have not been vaccinated for many years.

Dosage:	Patient under 1 year	..	0.5g.
	„ 1-6 years	..	1.0g.
	„ 7 years or more	..	1.5g.

3. *Generalized Vaccinia, Chronic Progressive Vaccinia, Eczema Vaccinatum*

Dosage:	Patient under 1 year	..	0.5g. immediately	} Repeat dose 2 days later if not improving.
	„ 1-6 years	..	1.0g.	
	„ 7-14 years	..	1.5g.	
	„ 15 years or more	..	2.0g.	

4. *Vaccinial Lesions of the Eye*

Dosage: As in 3 above but include half-hourly local instillation of 1% solution in sterile saline.

(To make the dilution required add the volume in the ampoule to ten times the amount of sterile saline.)

ADDITIONAL NOTES

Anti-vaccinial gamma globulin is of no known value in the treatment of post-vaccinal encephalitis.

In 3 and 4 above, because of the possibility that other viruses, e.g. herpes simplex may be the agent responsible, it is as well to obtain laboratory confirmation of the diagnosis.

Special Gamma Globulins

Obtainable from the Epidemiological Research Laboratory, as above, though in very short supply.

Convalescent Chickenpox Gamma Globulin

For chickenpox contacts where serious risk exists, e.g. a sickly infant, new-born in fact in contact with an infected mother, non-immune patient suffering from leukaemia, and patients undergoing cortico-steroid or immuno-suppressive therapy, or, again, with hypogammaglobulinaemia.

Dosage:	Under 1 year	..	..	0.5g.
	1-6 years	..	..	1.0g.
	7 years or more	..	..	1.5g.

Convalescent Mumps Gamma Globulin

For cases where serious risk exists, e.g. non-immune sick contact, leukaemia, or when undergoing cortico-steroid or immuno-suppressive therapy.

Dosage: As for Convalescent Chickenpox Gamma Globulin—please see previous page.

Other Sources of Normal Gamma Globulin

Doctors wishing to obtain gamma globulin for patients ineligible for gamma globulin on the National Health Service may purchase it privately from:—

Kabi Pharmaceuticals Ltd.,
Bilton House, Uxbridge Road,
EALING, W.5 LTH. Tel.: 01-567 4717

The cost (November 1970) is £1 13s. od. per ampoule containing 320 mg. (2 ml. of 16%).

Vaccines and other Immunological Materials Obtainable from the Central Public Health Laboratory, Colindale

Typhus, Rabies and Anthrax vaccines.

Frei antigen for Lymphogranuloma inguinale, Trichina antigen for Trichinosis, Hydatid antigen for Hydatid disease and cat-scratch fever antigen.

Enquiries relating to fungal antigens should be addressed to the Public Health Laboratory Service, Mycological Reference Laboratory, London School of Hygiene and Tropical Medicine, Keppel Street, London, WC1E 7HT. Tel.: 01-636 8636.

I am greatly indebted to Doctor J. E. Jameson, Director of the Public Health Laboratory Service, Brighton, for this up-to-date information.

(E) NATIONAL ASSISTANCE ACT, 1948

(i) *Section 47: Removal to suitable Premises of Persons in Need of Care and Attention*

Fortunately I have been able to avoid using this Section during 1969.

(ii) *Section 50: Burial or Cremation of the Dead*

Action was necessary in three cases under this Section in 1969.

(F) HOME PHYSIOTHERAPY SERVICE

The Home Physiotherapy Service provides qualified physiotherapists with completely equipped vans for the treatment of the incapacitated.

This charitable service, mainly concerned with the elderly, is complementary to the National Health Service hospital physiotherapy department. It provides treatment for those persons who, in the opinion of their hospital consultants or general practitioners, would derive more benefit from domiciliary attention but who cannot afford the services of a private physiotherapist.

(G) NATIONAL SOCIETY FOR THE PREVENTION OF CRUELTY TO CHILDREN
Telephone Hastings 1848.

(H) FAMILY PLANNING ASSOCIATION

Designed to advise married people on the spacing and limitation of families, including involuntary sterility and minor gynaecological ailments.

Clinics are held as follows:—

Arthur Blackman Clinic, London Road, St. Leonards-on-Sea.	Every Tuesday, 2.15 to 3.45 p.m. First and third Wednesdays in month 6 to 7.30 p.m. Telephone: Hastings 51225.
The Clinic, The Avenue, Eastbourne.	Every Monday, 2.30 to 4.0 p.m. <i>By appointment only.</i> Every Thursday, 2.30 to 4.0 p.m. and 5.30 to 7.0 p.m. Telephone: Eastbourne 26788 between 9.0 and 10.0 a.m.
Kent and Sussex Hospital, Out-patients Department, Tunbridge Wells.	Every Thursday, 2.0 to 3.15 p.m. and 6.0 to 7.30 p.m. <i>By appointment only.</i> Telephone: Tunbridge Wells 0892-20853
East Sussex and County Clinic, London Road, Bexhill-on-Sea.	Monday 6.30 to 8.0 p.m. <i>By appointment only.</i> Telephone: Cooden 3517 after 1.0 p.m.

The Family Planning Act, 1967, gives the Local Authority a general power to arrange for the giving of advice on contraception; to examine those seeking such advice and to supply contraceptive substances and appliances. The significance of the Act is that it extends existing powers by recognising need on social as well as medical grounds. Charges may be made in non-medical cases if the person can afford it.

(I) MARRIAGE GUIDANCE COUNCILS

Problems related to marital relationships.

Marriage Guidance Council Appointments Secretary, Telephone Bexhill 3380.

The Catholic Marriage Advisory Council, 84 Queen's Road, Brighton BN1 3XE (Telephone Brighton 0273-25261) serves Roman Catholics and others who may wish to make use of its services.

(J) EASTERN CO-ORDINATION COMMITTEE

This Committee is composed of representatives from National, Local Government and voluntary bodies, covering the Local Authority areas of Battle and Hailsham Rural Districts and the Boroughs of Rye and Bexhill by arrangement with the Children's Department, East Sussex County Council.

It is concerned mainly with the care of children in families where conditions may be adverse.

Your Medical Officer of Health is a member of this Committee which meets at Bexhill Town Hall.

(K) MEALS ON WHEELS SERVICE

Increased demand for meals necessitated the initiation of the next phase.

Equipment ordered and partially installed by the end of the year will eventually supply 300 meals daily involving extra expenditure of about £3,000. Propane gas for the new equipment will give flexibility and ensure production of meals in case of electricity failure.

A cold store was erected, two of the three existing freezer cabinets on loan were returned making available precious space in the kitchen for the extra equipment and giving latitude to buy in the best market rather than be tied to one purveyor, extra discounts were thus obtained on bulk purchasing.

Average cost price per meal of the food element only was increased from 2s. 3d. to 2s. 6d.

Price to recipients became 1s. 9d. on 7th April, 1969, vice 1s. 6d.

A pamphlet was issued in April, 1969, with the rate notices asking for volunteers as it was considered that the service should be 5 days weekly in order to be fully effective. The response was unfortunately so meagre that it was not possible to contemplate increasing the distribution from the present 3 days, the difficulty remains on the volunteer distribution side.

However, as a beginning to a fourth day, meals were supplied from 10th April, 1969, to a Darby and Joan Club in Battle every Thursday. 890 meals were supplied in 1969.

Individual approaches were made to all Parishes asking if they would be interested in having a luncheon club to supplement their three-day delivery but there was no demand.

Travelling allowance paid by the County Council to volunteers became 7d. per mile from 1st December, 1968.

Following the closure of the Northiam Meals on Wheels on 16th May, 1969, this demand was immediately absorbed in the Local Authority scheme.

Meetings of Clergy, Health Visitors and press releases were arranged in an endeavour to publicise the service, obtain outside views on possible improvements and volunteer recruitment.

Regular meetings were also held with voluntary and permanent staff.

Mrs. Spratt (W.R.V.S. Organiser), Miss Carey (W.R.V.S.) and Miss Kerr (W.R.V.S.) amongst others in this organisation, gave unstinted and dedicated support on the distribution side.

The permanent staff, Mrs. Jones (Supervisor) ably assisted by two part-time helpers, continued to give an excellent service. We are indeed fortunate to have such a happy atmosphere prevailing in a shared kitchen and cemented by the good personal relationships of voluntary and permanent staff.

I am pleased to report that we have continued to fulfil all demands throughout the year. As far as can be ascertained the recipients have been unanimous in their enjoyment of this service.

The personal interest of the Surveyor and Engineer (Mr. R. P. Field) and Mr. M. Cloke in satisfying all our criteria for equipment and kitchen arrangements has been much appreciated. The Treasurer (Mr. P. J. V. Allen) continues to ease our path on the financial side.

Mr. R. E. Briggs, Deputy Chief Public Health Inspector, has always made himself available to iron out any difficulties encountered in the day to day running.

The success of this venture is due to the combined support of all concerned.

**COMPARATIVE TABLE SHOWING NUMBERS OF MEALS PROVIDED
SINCE THE COMMENCEMENT OF THE SERVICE ON 8th OCTOBER,
1960**

		Annual Totals
1960	Voluntary schemes (W.R.V.S. and others)	156
1961	.. ..	1,082
1962	.. ..	1,900
1963	.. ..	2,290
1964	.. ..	4,986
1965	.. ..	9,510
1966	.. ..	11,116
1967	.. ..	12,204
1968	Voluntary schemes 7,221	
	L.A. scheme (commenced 17th June, 1968) .. 9,948	
		17,169
	Voluntary schemes—Burwash 1,359	
	Winchelsea 784	
1969	Northiam (up to 16th May, 1969) .. 685	
		2,828
	L.A. scheme (Northiam included from 19th May, 1969) 24,303	
		27,131
		87,544

(L) RYE AND DISTRICT COUNCIL FOR THE WELFARE OF THE ELDERLY

The Rye and District Council for the Welfare of the Elderly includes Winchelsea, Winchelsea Beach, Rye Harbour, Camber, Playden, East Guldeford, Iden, Peasmarsch, Udimore, Rye Foreign and of course, the Borough of Rye.

They endeavour to co-ordinate all the voluntary agencies connected with the welfare of the elderly in these areas which include Women's Royal Voluntary Service, Toc H., Inner Wheel, B. P. Guild, Rotary, Rye Boy Scouts, and "Learning to Live" projects arranged by the Headmaster for pupils attending the Thomas Peacocke School, Rye.

Herewith short list of eleven services offered by this organisation:—

- | | |
|---|--------------------------------|
| 1. Emergency Hospital Visiting Service. | 6. Small home repairs |
| 2. Chiropody Service. | 7. Home Decorating |
| 3. Gardening | 8. Shopping |
| 4. Visiting | 9. Wood Chopping (Kindling) |
| 5. Mending | 10. Help with filling in forms |
| | 11. Snow Clearance. |

Further information may be obtained from the Health Visitors of the parishes concerned who are represented on the Committee.

FOOD HYGIENE

The Ministry of Health and Ministry of Agriculture, Fisheries and Food have formulated combined Food Hygiene Codes of Practice for meat shops.

These new codes seek to achieve a complete separation of cold cooked meats from both raw cured meats and raw meats in order to avoid the risk of contamination of uncooked meats by cross infection and this of course includes separate knives, platters, etc., which must not be in common use.

Strict adherence to this method of approach is likely to be of prime importance in the prevention of food poisoning and should be followed in all kitchens, both in restaurants and homes.

	1966	1967	1968	1969
Total number of food premises in Battle Rural District	444	452	455	473
Number fully inspected	161	213	109	128
Informal notices served	20	52	13	16
Notices complied with by the end of the year	15	11	12	14

The comparatively small number of food premises inspected gives cause for disquiet.

The following is a comprehensive list of purveyors of food in Battle Rural District:—

Shops Classified according to their Main Trades

Grocers and General Provisions	..	..	..	..	142
Butchers	..	..	..	..	21
Sausage Makers (only)	..	..	..	..	3
Fishmongers	..	..	..	..	4
Greengrocers	..	..	..	..	7
Confectionery and Sweets	..	..	..	..	19
Cafes	..	..	..	..	59
Bread Shops	..	..	..	..	5
Shops selling Milk	..	..	..	..	28
Market stall (Women's Institute)	..	..	..	..	1
<i>Bakehouses</i>	..	..	..	..	6
<i>Hotels, Inns, Guest Houses</i>	..	..	..	..	115
<i>Canteens (Industrial, etc.)</i>	..	..	..	..	5
<i>Schools</i>					
(a) Private (Boarding and Day)	..	..	..	..	14
(b) East Sussex County Council (Day)	..	..	..	..	27
(c) E.S.C.C. Boarding Annexes	..	..	..	..	2
<i>Hospitals</i>					
(a) Regional Hospital Board	..	..	..	..	4
(b) Private	..	..	..	..	1
<i>Nursing Homes</i>	..	..	..	..	1
<i>Homes for the Aged</i>	..	..	..	..	3
<i>Food Preserving Premises (Jam)</i>	..	..	..	..	3
<i>Poultry Processing Unit</i>	..	..	..	..	1
<i>Village Trust</i>	..	..	..	..	1
<i>Holiday Village</i>	..	..	..	..	1

473

Registered Food Premises

PREMISES REGISTERED UNDER SECTION 16 OF THE FOOD AND DRUGS ACT, 1955

Ice Cream

No. of premises on Register at end of 1968	..	203
New registrations during 1969	.. ..	3

Ice cream is not manufactured within the District and shops sell the wrapped product.

Sausages

No. of premises on Register at end of 1968	..	20
New registrations during 1969	.. ..	1

Preserved Foods

No. of premises on Register at end of 1968	..	10
New registrations during 1969	1

Game Act, 1831

Six persons were licensed to deal in Game during the year 1969.

The Central Abattoir, Junction Road, St. Leonards-on-Sea

This is jointly owned and administered by Battle Rural District Council and three neighbouring Authorities (Hastings County Borough, the Borough of Bexhill and the Borough of Rye).

Average weekly throughput:—

Financial year ending 31.3.1969	Financial year ending 31.3.1970
332 units	570 units

Slaughter of Animals Act, 1958

No person was licensed to slaughter animals in Battle Rural District during 1969.

Condemned Foods

Certificates are issued when required, food is then either removed to the Council's refuse tip, or stained and subsequently used in soap making.

INSPECTION OF MEAT AND OTHER FOODS**Food found to be unfit for human consumption**

During the year the undermentioned foodstuffs were found to be unfit for human consumption:—

Tinned Fish	.. ..	14 ozs.	Tinned Fruit Juice	.. ..	6 lbs.
Tinned Fruit	.. ..	21 lbs.	Tinned Meat	.. ..	14 lbs.
Tinned Vegetables	.. ..	11 ozs.			

In addition to the above, a large quantity of frozen pre-packed foods were rendered unfit for consumption by electricity failure in shops, and 2½ tons were damaged by fire at a food store.

FOOD AND DRUGS ACT, 1955

BRUCELLOSIS

The last remaining farm with a dairy herd of 95 cows retailing raw (unpasteurised) farm-bottled milk was found to be heavily infected with *Brucella abortus* type 1.

An immediate notice dated 3rd December, 1969, under Regulation 20 of the Milk and Dairies (General) Regulations, 1959, was placed upon this milk supply.

This had the effect of causing all milk to be sent for pasteurisation with a personal warning from me to the farmer that no one should drink the milk in its raw state.

Subsequent tests of this herd proved that the infection was intractable and the farm management agreed on 16th February, 1970, that eradication in the foreseeable future was not possible and they accepted the necessity for continuing pasteurisation of the whole supply.

This investigation resulted in an unusually abnormal number of samples as shown in the following table:—

Milk Supplies—*Brucella Abortus*

(i) Number of samples of raw milk examined	..	368
(ii) Number of positive samples found	.. .. .	21
(iii) Action was taken in respect of positive samples	..	21

All were satisfactory for penicillin content and negative for *M. tuberculosis*.

Periodically I receive notification from another Medical Officer of Health in Kent advising me that milk from this District arriving in bulk tankers for pasteurisation has been found to contain Brucellosis prior to being processed. Action is then taken to notify the Divisional Veterinary Officer in order to assist the farms in taking preventive action and in addition we alert the farmer and his workers not to drink the milk in its raw state.

Brucellosis is now known to be an occupational disease affecting Veterinary Officers and farm workers by contact also their families who may drink the raw milk. Fortunately, its occurrence is rare in the population generally because 99% of milk is now treated (pasteurised).

New incentive schemes are in the pipeline and should give the necessary stimulus for eventual eradication of this costly disease in dairy herds.

MILK INSPECTION

The Divisional Veterinary Officer informed me on 19th December, 1969, that a *Salmonella dublin* infection had been isolated in a dairy cow in Burwash. Investigation of farm personnel including workers and families revealed recent illness in a boy *aet.* 10 years.

Twelve samples from the two families concerned were submitted to the Public Health Laboratory on 23rd December, 1969. The boy and

his mother who lived on the farm and also the wife in the second family who did not live on the farm and apparently had no personal contact were found to be excreting *Salmonellae dublin*.

Bulk feed and a stream passing through the farm which accepted effluent from a nearby slaughterhouse and bulked milk from the herd did not reveal any infection. The one infected cow had been slaughtered prior to this investigation.

The most likely assumption would appear to be that milk from this cow had been the vehicle of infection.

There was no evidence of spread and negative samples were obtained.

POULTRY INSPECTION

	1968	1969
Number of poultry processing premises within the District	1	1
Number of visits to these premises	87	56
Total number of birds processed during the year ..	1,325,050	1,569,000
Types of birds processed during the year	Broilers, cap- ons & turkeys	Broilers, cap- ons & turkeys
Percentage of birds rejected as unfit for human consumption	0.81	1.16
Weight of poultry condemned as unfit for human consumption (approx.)	36,400 lbs.	54,459 lbs.

WATER SUPPLY

On the 31st December, 1969, there were three Statutory Undertakings supplying water of a high standard of purity and adequate quantity.

All water for domestic use is treated and chlorinated.

None of the water supplied to Battle Rural District is plumbo solvent.

<i>Undertaking</i>	<i>Parishes</i>
Eastbourne Waterworks Company ...	Ashburnham, Battle, Beckley, Bodiam, Brede (part), Brightling, Burwash, Catsfield, Crowhurst, Dallington, Etchingam, Ewhurst, Hurst Green, Iden, Mountfield, Northiam (part), Peasmarsh, Playden, Rye Foreign, Salehurst, Sedlescombe (part), Ticehurst, Whatlington.
Hastings Corporation	Brede (part), Camber, East Guldeford, Fairlight, Guestling Icklesham including Winchelsea Beach, Winchelsea Town and Rye Harbour, Pett, Sedlescombe (part), Udimore and Westfield.
Mid-Kent Water Company	Northiam (part).

Extensions to Existing Schemes

The following minor extensions were completed in 1969:—

<i>Parish</i>	<i>Area</i>	<i>Properties</i>
Brightling	Brightling Road	Thirteen
Ewhurst	Junction Road	Five
Northiam	Quickbourne Lane	Ten

Fluoride Content of Main Water Supplies.

(a) *Eastbourne Waterworks Company*

The fluoride content of the four sources used for supplying Battle Rural District are given below:—

<i>Station</i>	<i>Fluoride as F mg/l.</i>
Powdermill, Battle.. ..	0·21
Burwash	0·26
Hazard's Green, Ninfield	0·33
Sedlescombe	0·15

(b) *Hastings Corporation*

The fluoride content of water supplied from the Brede Treatment works is 0·1 mg/l.

(c) *Mid-Kent Water Company*

The fluoride content of the water supplied to Northiam from Goudhurst Pumping Station is not measurable.

All these main water supplies fall below the optimum level of 1 part per million advised by leading authorities as being necessary to prevent the decay of teeth in young children.

Apparently, no progress has been made by the Water Companies supplying this area to implement the Council's desire to accept fluoridation.

No public health measure has been the subject of such careful and meticulous research prior to being introduced to the public.

Private Piped Water Supply

NORMANHURST ESTATE, CATSFIELD

17 properties are supplied.

The water is filtered but not chlorinated.

Bacteriological reports have been satisfactory but regular sampling is indicated.

Chemically, there is an objectionable amount of iron and this aspect is in process of further investigation.

TOOT ROCK, PETT LEVEL

This private supply was absorbed into the Hastings Corporation Water Undertaking and ceased to function as a separate entity.

**DISTRIBUTION OF PIPED WATER SUPPLIES—DOMESTIC
PROPERTIES CONNECTED TO THE MAIN**

	Properties				Estimated Population 1969 County Council Year Book
	1966	1967	1968	1969	
<i>Eastbourne Waterworks Company</i>					
Ashburnham	68	68	70	80	265
Battle	1,794	1,827	1,807	2,006	4,805
Beckley	266	270	318	346	891
Bodiam	129	130	98	110	274
Brede—see also (a) below ...	4	4	9	9	1,312 (a)
Brightling	72	78	96	105	368
Burwash	681	697	727	838	1,391
Catsfield	210	211	218	233	740
Crowhurst	238	241	247	267	687
Dallington	93	93	99	110	288
Etchingham	245	245	234	245	590
Ewhurst	235	238	260	348	842
Hurst Green	290	292	285	330	819
Iden	121	122	136	145	392
Mountfield	141	142	167	177	493
Northiam—see also (b) below	54	55	59	62	1,624 (b)
Peasmarsh	216	219	245	347	756
Penhurst	6	6	8	9	37
Playden	101	105	132	117	298
Rye Foreign	66	66	65	70	193
Salehurst	662	671	664	752	4,974
Sedlescombe—see also (c) below	328	339	390	430	1,198 (c)
Ticehurst	977	1,044	1,045	1,045	1,842
Whatlington	98	108	110	114	320
<i>Hastings Corporation</i>					
Brede—see also (a) above	444	467	505	547	1,312 (a)
Camber	255	256	283	287	540
East Guldeford	20	20	23	23	81
Guestling*	1,326	1,371	1,394	1,394	2,694
Icklesham†	1,008	1,022	1,028	1,028	2,414
Udimore	111	117	114	117	366
Westfield	677	737	760	767	2,107
Sedlescombe—see also (c) above	7	8	10	17	1,198
<i>Mid-Kent Water Company</i>					
Northiam—see also (b) above	510	528	527	527	1,624 (b)
	11,453	11,797	12,133	13,002	34,799

*Including the parishes of Pett, Fairlight and that part of Guestling known as Three Oaks.

†Including Winchelsea Town, Winchelsea Beach and Rye Harbour.

There are no permanent standpipes in this District.

Sampling of Public Supplies

The following table summarises the results of sampling public supplies:—

Sources	Samples	Satisfactory	Unsatisfactory	Total
(a) <i>Samples taken by the Council:</i>				
Toot Rock, Pett Level ..	Bacteriological	2	—	2
Hastings Corporation:				
Fairlight	Bacteriological	1	—	1
Playden	Bacteriological	1	—	1
Eastbourne Waterworks Co.:				
Catsfield	Bacteriological	2	—	2
Sedlescombe	Bacteriological	3	—	3
Ticehurst	Bacteriological	4	—	4
(b) <i>Reports received from Statutory Undertakings:</i>				
Hastings Corporation:				
Fairlight	Bacteriological	38	—	38
Fairlight (Warren Service Reservoir)				
	Bacteriological	4	—	4
Eastbourne Waterworks Co.:				
Powdermill Lane, Battle	Bacteriological	20	—	20
	Chemical and Bacteriological	2	—	2
Burwash	Bacteriological	13	—	13
	Chemical and Bacteriological	4	—	4
Sedlescombe	Bacteriological	19	—	19
	Chemical and Bacteriological	2	—	2

WATER SAMPLES TAKEN FROM NEW AND SUSPECT SOURCES

Parishes	Wells		Springs		Rainwater tanks	
	Satisfactory	Unsatisfactory	Satisfactory	Unsatisfactory	Satisfactory	Unsatisfactory
Beckley	1	—	—	—	—	—
Burwash	1	—	—	—	—	—
Catsfield	1	—	—	—	—	—
Dallington	1	—	—	—	—	—
Ewhurst	1	2	—	—	—	—
Iden	2	—	—	—	—	—
Northiam	—	—	1	2	—	—
Peasmarsh	1	—	—	1	—	—
Ticehurst	—	1	—	—	—	—

Advice is given to consumers in all cases of unsatisfactory water supplies.

DUNGENESS NUCLEAR POWER STATION, ENVIRONMENTAL MONITORING

Reports were received at regular intervals covering the period from January to December, 1969.

The following comments were extracted:—

The levels of radioactivity in fish and shellfish and gamma radiation dose rates on the beach are not significantly different from the already very low levels found previously. These are due entirely to background radioactivity and none is attributable to the operation of the station.

The levels of strontium 90 in the milk sampled in the two zones were all substantially the same as those which are found in comparable parts of the country where there are no nuclear power stations.

The Departments responsible for controlling discharges of radioactive waste and direct radiation from the station consider that the position shown in this report is satisfactory.

SEWERAGE

CAMBER

The Contact Stabilisation Plant constructed at Camber was brought into operation in time for the summer season.

ETCHINGHAM AND HURST GREEN

This contract was substantially completed during the year.

GUESTLING AND WEST PETT

Work on this scheme was completed during the year.

ICKLESHAM

Work commenced in February on the extension to the Sewage Treatment Works.

WESTFIELD

This scheme commenced in June, 1969.

WINCHELSEA BEACH

Completed in October, 1969.

CESSPOOL EMPTYING SERVICE NUMBER OF LOADS REMOVED

	Private Properties				Local Authority				Total			
	1966	1967	1968	1969	1966	1967	1968	1969	1966	1967	1968	1969
January ..	181	182	215	★	4	2	7	★	185	184	222	279
February ..	244	213	232	★	4	10	7	★	248	223	239	240
March ..	288	234	238	★	4	10	6	★	292	244	244	315
April ..	233	266	311	★	15	9	25	★	251	275	330	321
May ..	284	296	287	★	19	26	25	★	303	322	312	311
June ..	297	275	257	★	31	19	22	★	328	294	279	331
July ..	252	264	263	★	15	23	23	★	267	287	286	338
August ..	276	267	353	★	24	31	32	★	300	298	385	315
September ..	302	221	270	★	11	17	22	★	313	238	292	311
October ..	260	230	270	★	6	26	32	★	266	256	302	300
November ..	209	243	210	★	6	8	5	★	215	251	215	234
December ..	194	182	195	★	2	2	13	★	196	184	208	242
Totals ..	3,020	2,873	3,101	★	144	183	219	★	3,164	3,056	3,320	3,537

★ The figures for 1969 now represent the sum total of private properties and local authority loads removed in each month.

This change is consequent upon an O & M survey which considered that the statistical loss was of insufficient value to warrant the paper work involved.

REFUSE COLLECTION

Refuse collection is made fortnightly except in the parishes of Battle, Camber, Northiam, Salehurst, Sedlescombe, Westfield, and Winchelsea Town, where it is made weekly.

The Council's fleet of refuse vehicles consists of two Shelvoke and Drewry Pakamatics, one Dennis Paxit and four Shelvoke and Drewry fore-and-aft tippers. A J.C.B. mechanical shovel is used for refuse disposal.

The labour force, including the foreman, the driver of the J.C.B. mechanical shovel, and salvage depot attendant consists of 27 men.

Special collections of large household refuse are arranged at the request of householders.

Salvage

		1967	1968	1969
Mixed Wastepaper..	..	£2,230	£2,050	£2,114
Rags..	..			
Metals	..			

LITTER ACT, 1958

100 litter bins on the coastal strip from Pett Level to Camber and 15 street bins in Camber were sited at focal points.

Beach wardens were employed to pick up litter and a full-time driver with a van visited each bin at least every two days with special attention at Bank Holidays.

This comprehensive scheme for litter clearance from the coastal areas continued from May till October, 1969.

Main Highways

The East Sussex County Council as Highway Authority provided approximately 25 litter bins on laybys on trunk roads in Battle Rural District.

Bin clearance was incorporated in this Authority's refuse collection scheme.

CIVIC AMENITIES ACT, 1967

This Act makes it an offence to abandon a motor vehicle and imposes a duty on local authorities to remove abandoned vehicles and to make provision for owners to leave unwanted vehicles in specified places. There is also an obligation to provide places where householders may leave unwanted articles and rubbish.

The Council provides a free disposal service for old motor cars and free collections of bulky refuse.

Old cars are collected by a car breaker paid by the Council, and during 1969, 53 cars were dealt with in this way. Of these, 17 were found abandoned and 36 were removed at the request of owners.

503 free collections of bulky refuse were also made in 1969, as compared with 462 in 1968.

PUBLIC CONVENIENCES IN BATTLE RURAL DISTRICT

Public conveniences with wash-basins are provided by the Council at:

The Abbey Green, Battle,
Free Car Park, Battle (Mobile),
Camber, East,
Camber, Central,
Camber, West,
Hurst Green
Pett Level,
Robertsbridge
Rye Harbour,
Winchelsea Beach.

By arrangement with the brewers, the Council contributes to the cost of the public conveniences at the New Inn, Winchelsea Town.

RENT ACT, 1968

Part I—Applications for Certificates of Disrepair .. Nil

Part II—Applications for Cancellation of Certificates .. Nil

HOUSING

1. Inspection of dwelling-houses during the year

(i) (a)	Total number of dwelling-houses inspected for housing defects (under the Public Health or Housing Acts)	1,521
(b)	Number of inspections made for this purpose ..	2,007
(ii) (a)	Number of dwelling-houses (included under sub-head (i) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925, and 1932	123
(b)	Number of inspections made for this purpose ..	377
(iii)	Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	17
(iv)	Number of dwelling-houses (exclusive of those referred to under the preceding sub-heading) found not to be in all respects reasonably fit for human habitation	91

2. Remedy of Defects during the Year without Service of Formal Notices

Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their officers	24
---	----

3. Action under Statutory Powers during the Year

(A) *Proceedings under Sections 9, 10 and 12 of the Housing Act, 1957:*

(i) Number of dwelling-houses in respect of which notices were served requiring repairs	Nil
(ii) Number of dwelling-houses which were rendered fit after service of formal notices:	
(a) By owners	Nil
(b) By Local Authority in default of owners ..	Nil
(iii) Number of dwelling-houses acquired and subsequently rendered fit by the Local Authority	Nil

(B) *Proceedings under the Public Health Acts:*

(i) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied ..	2
(ii) Number of dwelling-houses in which defects were remedied after service of formal notices (by Local Authority)	—
(iii) Number of dwelling-houses in which defects were remedied after service of formal notices (by owners) ..	2

(C) *Proceedings under Section 16 of the Housing Act, 1957:*

(i) Number of Representations, etc., made in respect of dwelling-houses unfit for human habitation	22
(ii) Number of dwelling-houses in respect of which Demolition Orders were made	Nil
(iii) Number of dwelling-houses demolished in pursuance of Demolition Orders	Nil
(iv) Number of dwelling-houses closed in pursuance of Undertakings accepted from owners	17
(v) Number of dwelling-houses demolished which were the subject of Undertakings	—
(vi) Number of dwelling-houses in respect of which Undertakings were accepted from owners which have since been made fit	12

(D) *Proceedings under Section 18 of the Housing Act, 1957:* .. Nil

(E) *Proceedings under Section 24 of the Housing Act, 1957...* Nil

HOUSING ACT, 1969

Improvement Grants

This Act introduced a number of amendments to past legislation and new powers for securing the improvement of houses. The maximum amount of discretionary grant was increased to £1,000 and the Council may now allow repairs "necessary to make other improvements fully effective" to rank for grant. The maximum for standard grants was increased to £200 or £450 in certain special cases.

Those sections of the 1964 Act dealing with improvement areas were repealed and new powers were substituted. These widened the concept of improving houses to include improvements to the environment and improvement notices were abandoned in favour of a policy of securing voluntary co-operation supplemented by powers of compulsory purchase to be used where co-operation was not forthcoming.

In this rural district those remaining houses in need of improvement are scattered and improvement area procedures are not generally appropriate. Nevertheless, the rate of private improvement with the aid of grants is above average and the new Act has resulted in a sharp rise in applications.

An amendment to Section 9 of the Housing Act, 1957, provides improved powers to secure repairs but a natural disinclination to proceed is a result of the poor returns received by landlords in cases of controlled rents.

Discretionary Grants

					<i>Number of Dwellings</i>
Applications received in 1969	..	..	..	..	73
*Applications approved in 1969:					
Owner/occupied	..	..	..	..	39
Other	..	..	..	..	23
					— 62
Total amount of grant paid in 1969 for the completion of 61 dwellings	..	..	..	..	£18,537

Standard Grants

					<i>Number of Dwellings</i>
Applications received in 1969	..	..	..	..	28
*Applications approved in 1969:					
Owner/occupied	..	..	..	..	18
Other	..	..	..	..	5
					— 23

26 dwellings were completed and provided in 1969 with the following amenities at a total cost of £4,745:—

Fixed baths or showers	..	..	..	..	21
Wash basins	..	..	..	..	23
Hot water supplies	..	..	..	..	25
Water closets	..	..	..	..	24

Food storage facilities	..	..	..	16
Number of dwellings where advantage taken of increased grant	..	..		12

*N.B.—It will be appreciated that the number of applications approved in 1969 is not necessarily the number received or completed in that same year.

HOUSING PROVIDED BY THE LOCAL AUTHORITY

1939	..	..	..	..	..	433
1947	..	..	..	..	..	540
1957	..	..	..	..	..	1,326
1967	..	..	..	..	..	1,577
1968	..	..	..	..	..	1,678
1969	..	..	..	..	..	1,784

155 families were rehoused during 1969.

726 applicants were on the Register on 31st December, 1969 (221 of these on "Deferred" or non-urgent list).

The Council controls 89 housing estates, varying from 2 dwellings to 125.

All Council dwellings have main water supplies.

Rent Rebate Scheme

<i>Year</i>	<i>Approximate amount of rebate</i>		
1965	£630
1966	£1,546
1967	£1,794
1968	£2,058
1969	£2,838

No rebates are granted to recipients of Social Security Benefits.

HOUSING FOR THE ELDERLY

Total units completed as follows:—

Battle	..	..	..	..	..	17
Northiam	..	..	..	..	..	21
Sedlescombe	..	..	..	..	..	13
Ticehurst	..	..	..	..	..	17
Westfield	..	..	..	..	..	17

Each block controlled by a resident Warden.

NEW DWELLINGS

Erected during 1969

(a) By this Council:

Battle	..	..	12	{	4 with 2 bedrooms 8 with 3 bedrooms
Ewhurst	..	..	12	{	1 with 1 bedroom 5 with 2 bedrooms 6 with 3 bedrooms
Northiam	..	..	16	{	6 with 2 bedrooms 10 with 3 bedrooms
Peasmarsh	..	..	45	{	6 with 1 bedroom 15 with 2 bedrooms 24 with 3 bedrooms
Staplecross	..	..	41	{	8 with 1 bedroom 20 with 2 bedrooms 13 with 3 bedrooms
Totals	..	..	126		

(b) By private enterprise:

148	{	59 with 2 bedrooms 85 with 3 bedrooms 4 with 4 or more bedrooms
-----	---	---

Under construction as at 31st December, 1969

(a) By this Council	..	130	{	Battle 78 Brede 14 Burwash 38
(b) By private enterprise	..	79		

				PRIVATE ENTERPRISE		LOCAL AUTHORITY
				New dwellings	Conversions	NEW DWELLINGS
1959	..	..	..	111	0	18
1960	..	..	..	144*	0	18
1961	..	..	..	160	34	22
1962	..	..	..	199	19	10
1963	..	..	..	203	5	18
1964	..	..	..	253	15	23
1965	..	..	..	278	26	10
1966	..	..	..	219	15	38
1967	..	..	..	212	25	141
1968	..	..	..	232	8	132
1969	..	..	..	148	16	126

*This is almost a ten year low, reverting to 1960; symptomatic of the present era of financial stringency leading to high interest rates with consequent difficulties in arranging mortgages.

LICENSED CARAVAN SITES

<i>Sites</i>	<i>Number of Caravans</i>
Crowhurst Park, Battle	300
Silver Sands Caravan Park, Camber	350
Frenchmans Beach, Rye Harbour	315
Rye Bay Caravan Park, Winchelsea Beach ..	272
Winchelsea Sands Caravan Park, Winchelsea Beach ..	300
Beauport Caravan Park, Battle	350
Coghurst Caravan Park, Guestling	300
Camber Caravan Park & Tourist Court, Camber ..	340
Lordine Court Caravan Park, Ewhurst	150
Beach Caravan Park, Pett Level	30
White Lodge Caravan Park, Winchelsea Beach ..	45
Devonia Caravan Park, Iden	20
The Cock Inn, Peasmarsh	25
Winchelsea Beach Caravan Park, Winchelsea Beach ..	50
Windmill Caravan Site, Winchelsea Beach ..	45
Ferryfields Caravans, Winchelsea	65
Victoria Way, Winchelsea Beach	6
Waterbridge Place, Winchelsea Beach	20
Links Caravan Site, Camber	6
Carters Farm, Pett	50
Land rear The Rother Valley Hotel, Northiam ..	12
Dogs Hill Road, Winchelsea Beach	12
Whitegates, Westfield	6
Stonepit Wood, London Road, Battle	5
Total	<u>3,074</u>

The issue of a site licence is conditional on planning consent having been obtained.

Occupation is restricted to the period 1st March—31st October.

Amenities provided are based on Model Standards, 1960, recommended by the Ministry of Housing and Local Government and subject to variation at the Council's discretion.

VISITS OF PUBLIC HEALTH INSPECTORS—COMPARATIVE

TABLE FOR YEARS 1959, 1965, 1966, 1967, 1968 and 1969

	1959	1965	1966	1967	1968	1969
Drainage and sewage disposal ...	1,355	1,682	1,560	1,120	1,202	1,049
Water supplies ...	430	230	277	293	184	198
Milk and dairies ...	35	29	49	52	20	27
Building inspections	2,330	3,279	3,800	3,969	3,751	2,917
Hop-pickers' dwellings	14	8	—	11	5	5
Infectious diseases ...	61	65	66	80	71	79
Food premises ...	85	462	382	433	357	222
Housing and Public Health Acts ...	619	548	465	480	620	1,148
Improvement Grants	984	779	665	588	636	859
Moveable dwellings...	61	73	44	54	40	22
Nuisances ...	262	489	509	819	657	722
Factories and workshops ...	6	10	8	12	9	12
Schools ...	7	—	—	—	3	15
Slaughterhouses ...	447	121	65*	91*	87*	56*
Public cleansing ...	156	51	44	74	158	73
Miscellaneous ...	334	716	836	934	811	748
Petroleum Regulations	102	189	120	114	203	93
Animal Boarding Establishments Act, 1963 ...	—	11	17	4	16	8
Offices, Shops and Railway Premises Act, 1963 ...	—	129	110	57	27	14
Agriculture, Health and Welfare Act, 1956 ...	—	—	—	—	—	14
Rent Act, 1957 ...	61	—	—	—	—	—
Totals ...	7,387	8,871	9,017	9,185	8,857	8,374

*These figures relate to a poultry processing unit as all private slaughterhouses in the District were closed at the end of 1965 on the opening of the Central Abattoir.

Despite a sharp drop in building inspections the time available for essential public health duties is still being severely eroded.

Petroleum (Regulation) Acts, 1928 and 1936

131 premises in Battle Rural District were licensed to store petroleum spirit necessitating 93 visits by the Public Health Inspectors.

OFFICES, SHOPS AND RAILWAY PREMISES ACT, 1963

This Act made provision for the health, welfare and safety of persons employed in offices, shops and certain railway premises.

At the end of 1969 the numbers of premises registered under this Act were:—

Offices	..	..	..	..	..	..	..	54
Retail shops	..	..	..	..	..	..	..	118
Warehouses, wholesale shops	..	..	..	..	..	..	..	2
Catering establishments open to the public, canteens	..	..	..	..	..	..	..	25
Fuel storage depots	..	..	..	..	..	..	..	Nil

ANIMAL BOARDING ESTABLISHMENTS ACT, 1963

All animal boarding establishments for dogs and cats must be licensed by the local authority. Special conditions may be specified by the local authority to ensure that the accommodation is suitable and that the animals will be adequately cared for in relation to food, drink, spread of disease, fire precautions and supervision.

A register of animals must be maintained by the licensee and be open to inspection.

In 1969, 12 premises were licensed to board a total of 229 dogs and 115 cats. Eight visits were made by the Public Health Inspectors.

FACTORIES ACT, 1961

Twelve inspections under the Factories Act, 1961, were made during 1969. There was one outworker under Section 110(1)(c). Conditions were satisfactory.

FACTORIES ACT, 1961

Inspections for purposes of provisions as to health.

PREMISES	No. ON REGISTER	INSPEC-TIONS	NOTICES	OCCUPIERS PROSECUTED
(i) Factories in which Sections 1, 2, 3, 4, and 6 are to be enforced by Local Authorities	3	—	—	—
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	132	12	—	—
(iii) Other premises in which section 7 is enforced by the Local Authority (excluding outworkers' premises)	—	—	—	—
TOTALS	135	12	—	—

Cases in which defects were found

PARTICULARS	NUMBER OF CASES IN WHICH DEFECTS WERE FOUND				NUMBER OF CASES IN WHICH PROSECUTIONS WERE INSTITUTED
	FOUND	REMEDIED	REFERRED		
			To H.M. INSPECTOR	By H. M. INSPECTOR	
Want of cleanliness ...	—	—	—	—	—
Overcrowding ...	—	—	—	—	—
Unreasonable temperature	—	—	—	—	—
Inadequate ventilation	—	—	—	—	—
Ineffective drainage of floors	—	—	—	—	—
Sanitary Conveniences:					
(a) insufficient ...	—	—	—	—	—
(b) unsuitable or defective ...	2	2	—	—	—
(c) not separate for sexes ...	—	—	—	—	—
Other offences against the Act (not including offences relating to outwork) ...	—	—	—	—	—
TOTALS	2	2	—	—	—

(Outwork Sections 133 and 134)

Nature of work	No. of outworkers in August list required by Sect. 133(1)(c)	No. of cases of default in sending lists to the Council	No. of prosecutions for failure to supply lists	No. of instances of work in unwholesome premises	Notices served	Prosecutions
Wearing apparel:						
Making, etc.	1	—	—	—	—	—
Cleaning and washing	—	—	—	—	—	—

INDUSTRIES

The numbers engaged in the main industries located in the District are given in the table below.

	At 31st December, 1969			At 31st December 1968
	Male	Female	Total	Total
Bakeries	41	7	48	48
Beach works	27	—	27	36
Building works	393	18	411	411
Bus and Coach Operators.. .. .	13	4	17	17
Cattle Breeding Station	16	4	20	23
Coal merchants	5	1	6	6
Concrete works	115	12	127	127
Egg packing station	9	2	11	9
Engineering works	493	108	601	601
Fencing contractors	31	1	32	32
Flour mills	51	12	63	79
Frozen food producer	—	8	8	11
Fruit and vegetable wholesaler	5	1	6	7
Fuel services	3	2	5	5
Gypsum mines	332	12	344	378
Hop gardens (permanent staff—Guinness's)	71	5	76	97
Hotels and motel	18	25	43	43
Jam factory.. .. .	28	37	65	53
Joinery works	26	1	27	26
Laundries	13	48	61	59
Oil distilling	3	—	3	6
Oil refining	16	—	16	17
Plastics factory	13	8	21	21
Poultry processing unit	31	26	57	53
Printing works	12	7	19	17
Sawmills	124	10	134	144
Sports goods manufacturers	30	12	42	43
Sports ground contractors	64	13	77	21
Wooden toy manufacturers	9	15	24	21

Mass Miniature Radiography in Industry

A completely mobile, self-contained Mass X-ray Unit is available to visit any premises employing 100 persons or more in the East Sussex area. The only facility required is a parking site for two vehicles.

Over 100 people can be given free chest X-ray examinations in a period of one hour and, as there is no undressing, both men and women are X-rayed at the same session. Arrangements can be made either by telephone to Brighton 66017 or by letter to the Director, East Sussex Mass Radiography Unit, 26 Ditchling Road, Brighton BN1 4SF.

It is emphasised that the Mass X-ray Service is free and that no information is disclosed without the patient's consent.

HOP PICKING

Hop picking by machines continued as in previous years at Messrs. Guinness Hop Farms Ltd. Water and toilet facilities were all satisfactory and available at strategic points throughout.

Personnel employed during 1969 comprised:—

	<i>Male</i>	<i>Female</i>
Students (Concordia)	131	5
Machine sheds and oast houses	269	50
Caravan park	6	6
	<hr/> 406	<hr/> 61

PREVENTION OF DAMAGE BY PESTS ACT, 1949

Preventive action is effected by routine maintenance of permanent baiting points at refuse tips, public sewers, sewage works and other vulnerable premises or areas by contract with a private firm.

Many farms have individual contracts with private firms for pest control.

The following table summarises work undertaken during the 12 months ending 31st December, 1969:—

	Type of property	
	Non-Agricultural	Agricultural
1. Number of properties in the district	11,232	1,736
2. (a) Total number of properties (including nearby premises) inspected following notification ...	685	—
(b) Number infested by (i) Rats	360	—
(ii) Mice	21	—
3. (a) Total number of properties inspected for rats and/or mice for reasons other than notification	291	—
(b) Number infested by (i) Rats	95	—
(ii) Mice	4	—

METEOROLOGY

RAINFALL FIGURES TAKEN AT BATTLE WATERWORKS

	Number of days on which rain fell	Longest period of drought	Periods of drought
1961 ..	146	20 days	2nd-19th March & 9th-28th May inclusive
1962 ..	149	20 days	4th-23rd Oct. inclusive
1963 ..	166	None recorded	None recorded
1964 ..	146	16 days	19th Sept.-4th Oct. inclusive
1965 ..	185	None recorded	None recorded
1966 ..	196	None recorded	None recorded
1967 ..	184	23 days	31st May-22nd June inclusive
1968 ..	170	None recorded	None recorded
1969 ..	152	29 days	24th Feb.-10th March inclusive 11th July-28th July inclusive 28th Aug.-14th Sept. inclusive 22nd Sept.-21st. Oct. inclusive

The definition of Drought is 15 days without rain.

Comparison with previous years is given in the following table:

<i>Year</i>	..	..	..	..	<i>Total rainfall</i>
1959	..	..	..	..	31.0 inches
1960	..	..	..	..	42.9 inches
1961	..	..	..	..	27.2 inches
1962	..	..	..	..	27.9 inches
1963	..	..	..	..	34.5 inches
1964	..	..	..	..	29.2 inches
1965	..	..	..	..	36.9 inches
1966	..	..	..	..	39.1 inches
1967	..	..	..	..	34.7 inches
1968	..	..	..	..	30.7 inches
1969	..	..	..	..	31.1 inches

